		982(a)
IAME AND ADDRESS OF SENDER :	TELEPHONE NO.:	For Court Use Only:
sert name of court, judicial district or branch court, if any, and Post Office and	Street Address:	
PLAINTIFF:		
FENDANT:		
NOTICE AND ACKNOWLEDG	MENT OF RECEIPT	Case Number:
behalf you are being served) to liability for the parameter permitted by law. If you are being served on behalf of a corporate form must be signed by you in the name of such such entity. In all other cases, this form must be receipt of summons. Section 415.30 provides the sign the Acknowledgment of Receipt below, if you	tion, unincorporated association ch entity or by a person authorize signed by you personally or by nat this summons and other doctors.	(including a partnership), or other entity, this zed to receive service of process on behalf of y a person authorized by you to acknowledge
Dated:		(Signature of sender)
ACKI	NOWLEDGMENT OF RECEI	IPT
This acknowledges receipt of: (To be complete 1.	complaint. Petition (Marriage) and:	
(To be completed by recipient)		
Date of receipt:	(Signature	of person acknowledging receipt, with title if Igment is made on behalf of another person)
Date this form is signed:	(Type or pri	rint your name and name of entity, if any, behalf this form is signed)